

06/16/2003

IDAHO DEPARTMENT OF WATER RESOURCES
PRELIMINARY RECOMMENDATION OF WATER RIGHTS ACQUIRED UNDER STATE LAW

RIGHT NUMBER: 27-11761

NAME AND ADDRESS: CRAIG KANTACK
944 W 97 S
IDAHO FALLS ID 83402

SOURCE: GROUND WATER

TRIBUTARY:

QUANTITY: 0.040 CFS

THE QUANTITY OF WATER UNDER THIS RIGHT SHALL NOT EXCEED 13,000
GALLONS PER DAY.

PRIORITY DATE: 07/26/1969

POINT OF DIVERSION:

T01N R37E S13 SWSE Within BONNEVILLE County

PURPOSE AND
PERIOD OF USE:

PURPOSE OF USE

PERIOD OF USE

QUANTITY

DOMESTIC

1/01 12/31

0.040 CFS

PLACE OF USE: DOMESTIC Within BONNEVILLE County

T01N R37E S13 SWSE

OTHER PROVISIONS NECESSARY FOR DEFINITION OR ADMINISTRATION OF THIS WATER RIGHT:

This partial decree is subject to such general provisions necessary for
the definition of the rights or for the efficient administration of the water
rights as may be ultimately determined by the Court at a point in time no
later than the entry of a final unified decree. Section 42-1412(6), Idaho
Code.

THE QUANTITY OF WATER DECREED FOR THIS WATER RIGHT IS NOT A
DETERMINATION OF HISTORICAL BENEFICIAL USE.

EXPLANATORY MATERIAL: Beneficial Use

PARCEL NO. RP01N37E138422A

SCANNED

MAY 25 2006

PROFILED



State of Idaho

DEPARTMENT OF WATER RESOURCES

900 N. Skyline Dr., Idaho Falls, Idaho 83402-1718 - (208) 525-7161 - Fax (208) 525-7177

EASTERN REGION

PHILIP E. BATT
GOVERNOR

KARL J. DREHER
DIRECTOR

March 18, 1998

CRAIG KANTACK
944 W 97TH S
IDAHO FALLS ID 83402

RE: RENUMBERED NOTICE

Dear Mr. Kantack:

The Department has changed the identification number for Notice of Claim #A25-13762. The new number is #A27-11761. We have also modified receipt #E020609 to reflect the new number.

A copy of the receipt and the Notice of Claim are enclosed for your records.

Respectfully submitted,

Autumn Jones
Records Clerk
Adjudication Bureau

Enclosure: Notice #A27-11761
Receipt #E020609

cc: file

SCANNED

MAY 25 2006

PROFILED

6/13/03 25-13762.

Cindy Bird

Bonneville Co. Assessors office. This owner has a house built in 1969 in the SWSE NOT The SWSW of Section 13, T01N, R 37E.

Returning the file to .I.F. because it is not a basin 27 claim.

According to Bonneville County records parcel # RPO1N37E138422 goes with this property It changed last year from RPO1N37E138421 because of an acreage adjustment. Home was built in 1969. 6-16-03

AJ0749NP
No. A27-11761

IDAHO DEPARTMENT OF WATER RESOURCES
ADJUDICATION CLAIM PROFILE REPORT
(REGIONAL)

DATE: 03/17/98
PAGE: 1

OWNER CODE	NAME & ADDRESS	PRIORITY DATE	WATER USE	USE PERIOD FROM TO	DIVERSION RATE	DIVERSION VOLUME
C	CRAIG KANTACK 944 W 97 S IDAHO FALLS ID 83402 (208) 662-5501	07/26/1967	DOMESTIC	01-01 12-31	0.04 CFS	
TOTAL DIVERSION:					0.04 CFS	

Water Source: GROUNDWATER

Tributary to:

Stage: BENEFICIAL USE

Point(s) of Diversion: T01N R37E S13 SWSW

BONNEVILLE County

Place of use Legal Description for: DOMESTIC

				NE				NW				SW				SE							
T	R	S	:	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	Lt	Ac	:			
				01N				37E				13											

POU County: BONNEVILLE

Non-Irrigation Uses: DOMESTIC, 1 HOME

Dates: Exam Made Date:

Verified Date:

Objection Filed Date:

Misc: Water District Number:

Field Inspection Flag:
Presumption Flag:

SCANNED

JUL 13 1995

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM.

CIVIL CASE NUMBER: 39576

Renumbered to 27-11761
Ident. Number: ~~A25-13762~~
Date Received: 1/ 9/1995
Receipt No: E020609
Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: CRAIG KANTACK 208-662-5501
Address: 944 W 97 S
IDAHO FALLS ID 83402

2. Date of Priority: JUL 26, 1967

3. Source: GROUNDWATER Trib. to:

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4 of	Lot	County
01N	37E	13	SW	SW	SW		BONNEVILLE

5. Description of diverting works:
WELL AND PUMP TO A DOMESTIC HOUSEHOLD *SE*

6. Water is used for the following purposes:

Purpose	From	To	C.F.S.	(or)	A.F.A.
DOMESTIC	01/01	12/31	0.040		

7. Total Quantity Appropriated is:
0.040 C.F.S. (and/or) A.F.A.

8. Total consumptive use is Acre Feet Per Annum.

9. Non-irrigation uses:
DOMESTIC, 1 HOME

10. Place of Use:

Township	Range	Section	1/4 of	1/4 of	Lot	Use	Acres
01N	37E	13	SW	SW		DOMEST	

11. Place of use in counties: BONNEVILLE

11-0000
RP 01N 37E 13 84 22A
2001
MICROFILMED

NOV 13 1995

12. Do you own the property listed above as place of use? YES

13. Other Water Rights Used:

14. Remarks:

15. Basis of Claim: BENEFICIAL USE

16. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the Snake River Basin Adjudication." (b.) I/We do _____ do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: _____

For Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____
_____ Date: _____

State of Idaho)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this _____ day
of _____ 19 _____

Notary Public

Seal

Residing at _____

My Commission Expires _____

MICROFILMED
NOV 13 1995

RECEIVED

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE
STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS JAN 09 1995RENUMBER: A27-11761
CIVIL CASE NUMBER: 39378
Identification No. A25-13762
Date Received
Receipt Number EO 20609/90IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEMNOTICE OF CLAIM
TO A
WATER RIGHTACQUIRED UNDER STATE LAW
For Domestic and/or Stockwater Purposes
Where Daily Use is less than 13,000 gallons per day. Department of Water Resources
Eastern District Office
Filing Fee \$25

RECEIVED

DEC 14 1994

Please type or print clearly

1. Name of Claimant (s) CRAIG KANTACK Phone (208) 662-5501

Mailing Address 944 W. 97th S. IDAHO FALLS, ID Zip 83402

2. Date of Priority (Only one per claim) 07/26/69

3. Source of water supply (Check one) (X) Groundwater or Other () (a) _____
which is tributary to (b) _____
Name or kind of source

4. Location of point of diversion is: Township 1N Range 37E

Section 13 SW 1/4 of SW 1/4 of _____ 1/4, Govt. Lot _____ B

County of BONNEVILLE

Additional points of diversion if any: _____

5. Description of existing diversion works (Ditches, Wells, Pumps, Pipelines, Headgate Etc.), including the dates of any changes or enlargements in use, the dimensions of the diversion works as constructed and as enlarged and the depth of each well. WELL & PUMP TO A DOMESTIC HOUSEHOLD.

6. Water is claimed for the following: (limited to Domestic and/or Stockwater only. See Instructions.)

For DOMESTIC purposes from 1/1 to 12/31 amount .04 (cfs)
(Both dates are inclusive)

7. Total quantity claimed .04 (cfs)

8. Total consumptive use claimed is de minimus

9. Non-irrigation uses. Describe fully. (Domestic give number of households served if single ownership; Stockwater Type and Number of livestock) DOMESTIC - 1 HOUSEHOLD

A2711761



NOV 13 1990

10. Place of use is: Township: 1N Range 37E
Section 13, SW 1/4 of SW 1/4, Govt. Lot _____, B.M.,
for (Circle One) Domestic Stock Domestic and Stock
Additional places of use, if any _____

11. In which county (ies) are lands listed above as place of use located? BONNEVILLE

12. Do you own the property listed above as place of use? Yes X No _____
If your answer is No, describe in Remarks below the authority you have to claim this water right.

13. Describe any other water rights used at the same place and for the same purposes as described above.
X None or _____

14. Remarks: _____

15. Basis of Claim (Circle One) Beneficial Use Posted Notice License Permit Decree

Court _____ Decree Date _____ Plaintiff vs Defendant _____

If applicable provide IDWR Water Right Number _____

16. Signature (s)
(a.) By signing below I/We acknowledge that I/We have received, read and understood the form entitled "How you will receive notice in the Snake River Basin Adjudication". (b.) I/We do _____ do not ✓ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of Attachments _____

For Individuals: I do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant (s) Larry Latta Date 10-30-94

Date _____

For Organizations: I do solemnly swear or affirm that I am _____

of _____, Title _____, that I have signed the foregoing
Organization
document in the space below as _____ of _____
Title Organization
and that the statements contained in the foregoing document are true and correct.

Signature of Authorized Agent _____ Date _____

Title and Organization _____

State of Idaho/or IDAHO)

County of BONNEVILLE) SS.

NOTARIZATION REQUIRED FOR EACH CLAIM

Subscribed and sworn (or affirmed) before me this 30TH day of OCTOBER 19 94

SEAL

Notary Public Robert D. Walker NOV 13 1996

Residing at IDAHO FALLS

My Commission Expires 11-2-98

Last Name _____ Ident No. _____

Copies: White-State, Yellow-Claimant